



#3 046  
7-27-01  
AP31409-B - 072448.0318

PATENT

Our File No.: A33149

Date: July 31, 2001

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Rose et al.  
Serial No. : 09/833,047  
Filed : April 11, 2001  
For : LONG-ACTING, CHEMICAL-RESISTANT SKIN EMOLLIENTS,  
MOISTURIZERS AND STRENGTHENERS

Assistant Commissioner for Patents  
Washington, DC 20231

Sir:

Transmitted herewith is an amendment in the above-identified application.

1. ☐ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
2. ☐ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.
3. ☒ No additional fee is required.

CERTIFICATE OF MAILING

I hereby certify that this paper is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231, on July 31, 2001.

Attorney Name Marta E. Delsignore

Registration No. 32,689

Signature

*Marta E. Delsignore*

Date of Signature July 31, 2001

The fee has been calculated as shown below:

	Claims remaining after amendmt. (Col. 1)	Highest No. Prev. Paid for (Col. 2)		Present extra (Col. 3)	<u>SMALL ENTITY</u>			<u>or</u>	<u>OTHER THAN A SMALL ENTITY</u>		
					<u>RATE</u>	<u>FEE</u>			<u>RATE</u>	<u>FEE</u>	
Total	*	Minus **	=	0	x	9 =	\$0	<u>or</u>	x	18 =	\$0
Ind.	*	Minus ***	=	0	x	39 =	\$0	<u>or</u>	x	78 =	\$0
( ) First Presentation of Multiple Dependent Claim					+	130 =		<u>or</u>	+	260 =	
TOTAL ADDITIONAL FEE						=	\$0	<u>or</u>	TOTAL	=	\$0

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest No. prev. paid for" in this space is less than 20, write "20" in this space.

\*\*\* If the "Highest No. prev. paid for" in this space is less than 3, write "3" in this space.

4.(a)[ ] An Extension of Time to respond to the PTO communication dated is hereby requested. The required fee, indicated below, is enclosed herewith.

Extension for response (check only one):

	<u>SMALL ENTITY</u>		<u>OTHER THAN A SMALL ENTITY</u>	
Within first month	<input type="checkbox"/>	\$ 55	<input type="checkbox"/>	\$ 110
Within second month	<input type="checkbox"/>	190	<input type="checkbox"/>	380
Within third month	<input type="checkbox"/>	435	<input type="checkbox"/>	870
Within fourth month	<input type="checkbox"/>	680	<input type="checkbox"/>	1,360

(check and complete the next item, if applicable)

☐ An extension for months has already been secured and the fee paid therefor of \$ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$.

or

(b)[X] In the event that an extension of time is required, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.

5. ☐ Please charge our Deposit Account No. 02-4377 in the amount of \$. Two copies of this sheet are enclosed.
6. ☐ A check in the amount of \$ is attached.
7. ☒ The Commissioner is hereby authorized to charge payment of any additional filing fees required under 37 CFR 1.16 and/or 37 CFR 1.17 associated with this communication or credit any overpayment to Deposit Account No. 02-4377. Two copies of this sheet are enclosed.

BAKER BOTTS L.L.P.

By Marta E. Delsignore  
Marta E. Delsignore

PTO Registration No. 32,689

Enclosures